

RUSTINATO 03 JUN 2005

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/537567

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		/				
4	/					
5		/				
6		/				
7	5					
8		5				
9						
10		5				
11		5				
12	/					
13		/				
14		/				
15		3				
16	/	3				
17		/				
18	/					
19		7				
20		/				
21		3				
22		3				
23	/					
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49						
50						
TOTAL IND.	8					
TOTAL DEP.	59					
TOTAL CLAIMS	67					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						